



Squamous cell carcinomas in Afro-Caribbean women.

Nadège Cordel, Benoît Tressières, Lucie Bonnacarrere

► To cite this version:

Nadège Cordel, Benoît Tressières, Lucie Bonnacarrere. Squamous cell carcinomas in Afro-Caribbean women.. Journal of The American Academy of Dermatology, Elsevier, 2012, 67 (4), pp.788-9. 10.1016/j.jaad.2011.09.041 . inserm-00849037

HAL Id: inserm-00849037

<https://www.hal.inserm.fr/inserm-00849037>

Submitted on 29 Jul 2013

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

Squamous cell carcinomas in Afro-Caribbean women.

(comment about the article: “Squamous cell carcinomas in African American women” by Woolery-Lloyd, J Am Acad 2011; 65: 221-23.)

Nadège Cordel (1), Benoît Tressières (2), Lucie Bonnacarrere (3)

(1) UF Dermatologie-Médecine Interne, CHU de Pointe-à-Pitre, Guadeloupe

(2) CIC-EC 802 Antilles-Guyanne, CHU de Pointe-à-Pitre, Guadeloupe

(3) UF Dermatologie-Médecine Interne, CHU de Pointe-à-Pitre, Guadeloupe

Corresponding Author and reprint request:

Nadège Cordel, M.D

UF Dermatologie-Médecine Interne

CHU Pointe-à-Pitre

BP 465

97159 Pointe-à-Pitre cedex

Tel : +33 590 89 15 45/ Fax : +33 590 89 16 15

E-Mail: nadege.cordel@chu-guadeloupe.fr

Manuscript word count: 439

Manuscript figure count: 1

Manuscript reference count: 5

The Authors had full access to all the data in the study and take full responsibility for the integrity of the data and the accuracy of the data analysis.

Funding sources: none

Conflicts of interest: none

1 Squamous cell carcinoma (SCC) of the lower limbs is a common occurrence in patients of
2 African descent as reported by several large series (1-3). In light of their two initial cases
3 occurring in African-American women, Woolery-Lloyd et al. have recently focused on this
4 localization for the differential diagnosis of hyperpigmented plaques on the lower limbs of
5 elderly African American women (4).

6 The anogenital area is another common site of SCC in individuals of dark skin, reported to be
7 10% to 23% of cases in some series (2,3). In our opinion, this localization should also be
8 routinely considered in SCC screening, particularly in Afro-Caribbean patients. We recently
9 performed a 11-year retrospective study with the aim of determining the incidence of SCC,
10 on the island of Guadeloupe (French West Indies, 400736 inhabitants, mostly black Caribbean
11 of African European descent). Incident cases of SCC from the study period were identified
12 using the computerized databases from the 3 pathology laboratories of the island (Dyamic
13 software). Inclusion criteria were the following: i) histological diagnosis of SCC or Bowen
14 disease ii) excision between 1/01/2000 and 31/12/2010 iii) patients who lived on the island of
15 Guadeloupe. Clinical features of SCC (i.e.: site, size) as well as demographic data of patients
16 (i.e.: sex, age) were recorded using the pathology assessment chart. Phototypes (according
17 the Fitzpatrick classification) were secondarily recorded by using the medical file or by
18 contacting patients . Finally 723 SCC from 551 patients were included in the study (i.e.: crude
19 annual incidence: 16.54 per 100 000 inhabitants (95% CI: 12.54; 20.53)). To date, 218
20 phototypes have been recorded: i.e.: albinos 1.8%; I-II: 23.4%, III: 45.4%; IV: 11.5%, V-VI:
21 17.9%. Among the 39 Afro-Caribbean patients with dark skin (phototypes V-VI), 24 (62%)
22 were women (mean age 64+/-18 years, median 68 years). The most common site of the SCC
23 was the anogenital area (37.5%) followed by the face (16.7%). The legs were affected in
24 12.5% of cases. These preliminary results are part of the first epidemiological study of SCC in

the Afro-Caribbean population. Our results showed a high incidence of SCC on the island of Guadeloupe and a different distribution of SCC site in Afro-Caribbean women than in African American women. The high prevalence of sexual transmitted infections due to AIDS and HPV, on the Caribbean islands might explain the high frequency of SCC in the anogenital area in Afro-Caribbean women and men whom SCC was commonly located on the penis in our study (i.e. 64.3%) (5). These results suggest that anogenital screening should be considered to detect SCC in black patients from the French West Indies and probably from all the Caribbean islands .

References:

1. Mora RG, Perniciaro C. Cancer of the skin in blacks: I. A review of 163 black patients with cutaneous squamous cell carcinoma. J Am Acad Dermatol 1981; 5: 535-43.
2. Halder RM, Bang KM. Skin cancer in blacks in the United States. Dermatol Clin 1988; 6: 397-405.
3. McCall CO, Chen SC. Squamous cell carcinoma of the legs in African Americans. J Am Acad Dermatol 2002; 47:91-3.
4. Woolery-Lloyd H, Elsaie ML, Avashia N. Squamous cell carcinomas of the lower limbs in African American women. J Am Acad Dermatol 2011; 65; 221-23.
5. Raggin CC, Watt A, Markovic N, Bunker CH, Edwards RP, Eckstein S et al. Comparisons of high-risk cervical HPV infections in Caribbean and in US population. Infectious agents and cancer 2009; 4 (Suppl I) S9.

Acknowledgements

The authors are grateful to Richard Medeiros, Rouen University Hospital Medical Editor, for his assistance in editing the manuscript.

Figure 1 . squamous cell carcinoma of the anal area in an Afro-Caribbean woman